

# Book Reviews

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**QUALITY CONTROL—Volume 4 in METHODS IN HEMATOLOGY**—Edited by I. Cavill, PhD, MRCPPath, Senior Lecturer in Haematology, Welsh National School of Medicine, Cardiff, Wales. Churchill Livingstone Inc., 1560 Broadway, New York, NY 10036, 1982. 191 pages, \$35.00.

*Quality Control in Hematology*, edited by I. Cavill, is a compilation of papers written by laboratorians predominantly in Wales and England with one contribution from California. Although a reference for quality control in hematology, coagulation and blood banks has been needed for some time in the field of laboratory medicine, the authors' attempt to do that falls short.

This book contains nine chapters and an appendix. The first chapter and the appendix deal with basic statistics and a brief historical overview of the development of statistics in industry and how they can be applied to laboratory medicine. However, as with most statistical discussions in references for quality control in hematology, the authors fail to show any straightforward way of how these statistics can be used on a day-to-day and moment-to-moment basis within a laboratory. The book as a whole assumes a considerable base of knowledge on the part of the individual reader and, therefore, will have a limited audience consisting primarily of laboratorians directly involved in hematology. Those chapters dealing with blood counting and automation are based entirely upon Coulter systems with only brief mention that these methods and techniques would be applicable to other systems. From my own experience with other major automated systems, such as the ELT-8 and the Hemalog-8, I find these chapters to show a lack of understanding by the authors of the differences between these automated instruments. Although each chapter contains some information that is of interest, especially the protocols for how to calibrate automated instruments using fresh whole blood specimens, they are disjointed and do not deal in a practical way with how these techniques should be used on a moment-to-moment basis within a laboratory. An exception to this would be chapter 7, entitled "Intralaboratory Quality Control Using Patients' Data," by Brian Bull and R. A. Korpman.

Since the Bull algorithm, as it has come to be known, is the most commonly used quality control mechanism in hematology laboratories in the United States, this book is worth the price for the excellent discussion and very practical suggestions offered by Drs Bull and Korpman on how to use the algorithm of patients' data to control automated instrumentation within the hematology laboratory.

The chapters on standardization of coagulation tests and assays gives an excellent overview of what has been accomplished in England but deals only superficially with the problems faced by the wider geographic differences in the United States. In addition, although some detail for the preparation of coagulation reagents is discussed, practical suggestions as to how to use these reagents versus commercial reagents within individual laboratories on the day-to-day level are lacking.

The ninth chapter, entitled "Interpretation and Significance of Laboratory Results," was an excellent idea; however, it falls short in that it only briefly mentions the problem of systematic variance versus biologic variance in patients and it raises more questions than it answers.

This book, although useful to a limited number of people, could have been greatly improved by including a summary chapter that combines the discussion of statistics, their practical use on a day-to-day basis and the discussions of the various

authors into recommendations for the quality control in hematology laboratories on a moment-to-moment, day-to-day, week-by-week basis.

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**PHLEBOGRAPHY OF THE LOWER LIMB**—M. Lea Thomas, MA, MB, BChir, FRCP, FRCR. Churchill Livingstone, Inc., 1560 Broadway, New York, NY 10036, 1982. 220 pages \$39.00.

Acute and chronic venous diseases remain with us as common disorders that afflict both sexes and both young and old. Surprisingly, venous problems never provoke much excitement on the part of students, trainees or physicians in practice. Also, it is a field little emphasized in medical school, except perhaps for the problem of pulmonary embolism. However, even with pulmonary emboli, attention is often diverted away from the primary cause which is nearly always deep venous thrombosis of the lower limbs.

A major advance made during the lifetime of this reviewer has been the recognition of the fallibility of the bedside diagnosis of both acute and chronic venous disease. This simple fact has led to improvements in both diagnosis and treatment. This has come about by the development and implementation of noninvasive tests. The key factor in this progress has been the reemergence of phlebography as the final, definitive test. While, as noted by the author, phlebography has been with us for many decades, it still remains underutilized by the medical community. Why should this be? There are a variety of reasons which include the following: (1) it is poorly understood, (2) some radiologists find the procedure difficult and time-consuming, (3) the films are often seen as a maze of overlapping vessels whose anatomy is poorly appreciated and (4) its relevance to the clinical state is poorly understood.

While the title of the book might imply it is destined for bookshelves of radiologists, this reviewer hopes this is incorrect. I believe the text and superb illustrations should find a place in the hands of everyone interested in the problems of acute and chronic venous disease. The message is clear for those who are willing to listen. The well-performed phlebogram will often provide the necessary answers to difficult and often perplexing clinical problems.

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**BETTER HEALTH WITH FEWER PILLS**—Louis Shattuck Baer, MD, Burlingame, California. The Westminster Press, 925 Chestnut Street, Philadelphia, PA 19107, 1982. 168 pages, \$5.95 (paperback).

The title of this little book will not immediately endear it to physician readers. Yet the central theme is neither nihilism nor holism.

Rather, Dr Baer, Clinical Professor of Medicine Emeritus, Stanford, is making a simple plea to his fellow physicians to combine the "charm" of Socrates with the "fair words" of Aesculapius when prescribing medications.

Translated, "charm" could mean "bedside manner," a term that defies definition. "Fair words" could be those healing words we give as reassurance, as well as a willingness to listen

to the words that tumble from a troubled mind or an aching heart.

Dr Baer spells out his philosophy with warm honesty, punctuated with anecdotes from his many years of practice. The doctor makes his point.

Any patient who reads this book will realize he may not need "a pill for every ill." For the physician and for the patient this slim 131-page paperback is packed with words of wisdom.

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**DIAGNOSTIC BRONCHOSCOPY—Fourth Edition**—Peter Stradling, MD (Lond), FRCP, FRPS. Churchill Livingstone Inc., 1560 Broadway, New York, NY 10036, 1981. 159 pages, 190 illustrations in color, \$59.00.

The 1982 edition of this manual on bronchoscopic technique and observation maintains the high quality of the preceding editions. The text nicely describes the techniques and precautions that are generally recommended for the procedure of bronchoscopy, thus rendering it a useful guide for neophytes to this field.

Of particular note, however, is the large series of superb color plates, each accompanied by a clear explanatory drawing, that illustrate the full spectrum of endobronchial disease. This material provides an ideal reference for both experienced and novice bronchoscopists. The book's quality is excellent and everyone involved with pulmonary disease should have ready access to a copy.

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**INTRODUCTION TO CLINICAL RADIOLOGY**—Wallace T. Miller, MD, Professor and Vice Chairman, Department of Radiology, University of Pennsylvania School of Medicine, Philadelphia. Macmillan Publishing Co., Inc., 866 Third Ave., New York, NY 10022, 1982. 291 pages, \$24.50.

This single-authored textbook presents a practical approach for an introductory radiology course in medical school. It has chapters that cover the various organ systems of the body as well as brief discussions of modern imaging techniques, including new modalities such as nuclear resonance and positron emission tomography. Initially I approached this review with some reluctance because I anticipated that an elementary textbook would not be very stimulating reading. I was mistaken in this regard, and I soon found myself engrossed in the author's clear, direct style. He punctuates the chapters with multiple examples of normal and abnormal radiographs. These are presented in a quiz fashion, and the student is expected to participate in the interpretation of the radiographic findings. This problem-solving approach keeps one's interest at all times. My only criticism of this format is that the answers are placed at the end of the textbook, and the reader must continually flip back and forth between the questions in the chapter and the answers. I found it convenient to place a paper clip on page 233 so that I could rapidly find the answer and discussion of the entity in question.

There is a section at the end of the book entitled "Differential Diagnosis" which is a valuable compilation of abnormal radiographic findings with lists of their common and uncommon causes. There are a few minor points on which I would disagree with the author: the drawings illustrating collapse of the left upper and the left lower lobe on page 45, the omission of ultrasound in the discussion of pericardial effusion and the inclusion of only one reference (at the end of the chapter on the abdominal plain films). Additional references at the end of the other sections would be helpful for the student. Lastly, the author states that 10 rads of radiation exposure for the fetus may be a cause for elective abortion. Statements from radiology, gynecology and pediatric groups in 1978 have denied this assertion, stating that no diagnostic radiation is a sufficient threat to electively warrant a therapeutic abortion.

Any radiology department that has a teaching program for medical students would find this textbook to be helpful. Physi-

cians in training or in practice who wish to review their basic skill in interpreting radiographs, or in keeping abreast of new imaging developments, would find this book an enjoyable experience. Its relatively low price with generally high quality images make it an attractive choice.

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**ORTHOPEDIC REHABILITATION**—Edited by Vernon L. Nickel, MD, Professor of Surgery/Orthopedics and Rehabilitation, University of California, San Diego, School of Medicine. Churchill Livingstone Inc., 1560 Broadway, New York, NY 10036, 1982. 594 pages, \$65.00.

This excellent text is a landmark in neuromusculoskeletal rehabilitation. Historically, orthopedics became a specialty with rehabilitation as its primary mission. Restoring function for the physically disabled was accomplished by a wide variety of conservative physical measures together with assistive orthotic and prosthetic devices. The required skills have continued to the present. Even though surgical procedures have come to occupy a dominant place in the care of crippling conditions, the philosophy of rehabilitation and its techniques have grown and improved to involve a wide segment of medical disciplines. Rehabilitation of the disabled has become a cornerstone of our medical and social ethic.

Dr. Nickel is a world leader in the field of orthopedic rehabilitation. His philosophy, technical skill, his ability to organize and his leadership are known and appreciated worldwide. In this volume, he has assembled authors of comparable stature. Each chapter is essentially an independent treatise covering a given subject. Nonetheless, there is a common theme throughout the book which quite effectively ties the entire contents together.

The only criticism one could find with the text would be its attempt to cover so broad a field. One could wish for more detail in certain sections. Fundamentals have not been left out, rather details of technique are abbreviated. In a text covering such a comprehensive subject, this is inevitable.

This book should be required reading for all professionals involved in physical rehabilitation. It places in perspective the various disciplines making up the rehabilitation team. The editor and chapter authors have made a significant contribution.

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**MALIGNANT DISEASE OF THE VULVA**—Stanley Way, FRCS(Eng), FRCOG; assisted by David Guthrie, MB, BS, MRCOG, and Peter Phillips, BSc, PhD. Churchill Livingstone Inc., 1560 Broadway, New York, NY 10036, 1982. 83 pages, \$24.75.

Stanley Way has, in typical British fashion, consolidated his experience in the management of vulval cancer. We are all indebted to the contribution made by him and it is with pleasure that I reviewed his book. As a learning text the book has several deficiencies. There is very little factual knowledge concerning etiology and no mention at all of the field theory of cancer change. The description of the surgical technique is "wordsome," with almost no diagrammatic representations. There is no mention made as to modifying the extent of surgical therapy to match the volume and extent of disease, and the section on the surgical management of preinvasive cancer is completely inadequate in light of present knowledge. American oncologists plan deep pelvic node dissection based on the site of the lesion and the presence of disease in the uppermost femoral nodes. Way obviously is still adhering to the most radical surgical approach for every patient. Postoperative care is still very "British" and almost never used in North America.

In summary, the book is one author's collection of his very admirable results, but as a teaching textbook it has many deficiencies.

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